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**CONFIRMATION NO. 4561** 

Bib Data Sheet

<b>SERIAL NUMB</b> 10/768,953	0.4/0.0/0.004		Ó	<b>CLASS</b> 514	GRO	ROUP ART UNIT 1614		ATTORNEY DOCKET NO. 20199/100M275- US1	
Rodolfo Te Elena Pogg ** CONTINUING I This appIn	sta, V gesi, I <b>DATA</b> claim	di, Milan, ITALY; /ignate, ITALY; Milano, ITALY; A ************************************	09/26/2	2003					
ITALY MI20	003A	TIONS ************************************		ED					
Foreign Priority claimed yes to 35 USC 119 (a-d) conditions yes to Met after met Allowance Verified and Acknowledged Examiner's Signature Initials				STATE OR COUNTRY ITALY			TOTA CLAI 58	MS	INDEPENDENT CLAIMS 2
ADDRESS 7278									
TITLE Treatment of neur	romus	scular dysfunction of th	e lower	urinary tract wi	th sele	ctive m(	Glu5 anta	agonis	sts
					All Fees  1.16 Fees ( Filing )				
RECEIVED	FEES: Authority has been given in Pap No to charge/credit DEPO No for following:			per OSIT ACCOUNT		1.17 Fees ( Processing Ext. of time )			
					1.18 Fees (Issue)				
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